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CONFIRMATION NO. 4324

<b>SERIAL NUMBER</b> 10/734,692	<b>FILING OR 371(c) DATE</b> 12/11/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 25669-003
<b>APPLICANTS</b> Philip Stashenko, Medfield, MA; ✓ Yoshimura Okamatsu, Boston, MA; ✓ Hajime Sasaki, Needham, MA; ✓ Richard Battaglino, Boston, MA; ✓ Ulrike Spaete, Boston, MA; ✓				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/432,700 12/11/2002 ✓ <i>okay bc 6/18/2007</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 08/10/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> Allowance Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 30	<b>TOTAL CLAIMS</b> 25 10 <i>8</i>
<b>INDEPENDENT CLAIMS</b> 12 <i>18</i>				
<b>ADDRESS</b> Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C. One Financial Center Boston, MA02111				
<b>TITLE</b> Expressed genes that define the osteoclast phenotype				
<b>FILING FEE RECEIVED</b> 873	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	